2-11-02 Please type a plus sign (+) inside this box Attorney Docket No. ORT-1579 PATENT APPLICATION PAGET et al. First Inventor TRANSMITTAL PYRIDOARYLPHENYL OXAZOLIDINONE Title ANTIBACTERIALS, AND RELATED COMPOSITIONS AND **METHODS** (only for new nonprovisional applications under 37 CFR Express Mail Label No. EF195554155US 1 53(b)) Commissioner for Patents ADDRESS TO: APPLICATION ELEMENTS Box Patent Application See MPEP Chapter 600 concerning utility patent application Washington, DC 20231 7. CD-ROM or CD-R in duplicate, large table or 1. X Fee Transmittal Form (e.g., PTO/SB/17) (submit an original and a duplicate for fee processing) Computer Program (Appendix) 2. Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence 3. X Specification [Total Pages 49] Submission (if applicable, all necessary) (Preferred arrangement set forth below) a. Computer Readable Form (CRF) - Descriptive Title of the Invention b. Specification Sequence Listing on: - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D i. CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, or a ii. 🗌 paper computer program listing appendix c. Statement verifying identity of above copies - Background of the Invention **ACCOMPANYING APPLICATION PARTS** - Brief Summary of the Invention Assignment Papers (cover sheet & document(s)) - Brief Description of the Drawings (if filed) 10. 37 CFR 3.73(b) Statement Power of Attorney - Detailed Description (when there is an assignee) - Claim(s) 11. English Translation Document (if applicable) - Abstract of the Disclosure 12. Information Disclosure Statement ☐Copies of IDS Citations (IDS)/PTO-1449 4. Drawing(s)(35 USC 113) [Total Sheets 13. Preliminary Amendment [Total Pages3] 5. Oath or Declaration 14. Return Receipt Postcard (MPEP 503) a. Newly unexecuted original (Should be specifically itemized) b. Copy from a prior application (37 CFR 1.63(d)) 15. ☐ Certified Copy of Priority Document(s) (for continuation/divisional with Box 18 completed) (if foreign priority is claimed) i. DELETION OF INVENTOR(S) 16. Request and Certifications under 35 U.S.C. 122 Signed statement attached deleting (b)(2)(B)(i). Applicant must attach form inventor(s) named in the prior application, PTO/SB/35 or its equivalent. see 37 CFR 1.63(d)(2) and 1.33(b). 17. Other: EXPRESS MAIL CERTIFICATE #EF195554155US Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

18. ☐ If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:
☐ Continuation ☐ Divisional ☐ Continuation-in-Part (CIP) of prior application No.: , filed
Prior application information: Examiner ☐ Group Art Unit:
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS
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21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME Joseph S. Kentoffio Reg. No. 33,189

SIGNATURE Ju D. Centre DATE February 6, 2002

| | Complete if Known | | |
|-----------------|----------------------|--------------|--|
| | Application Number | | |
| FEE TRANSMITTAL | Filing Date | | |
| | First Named Inventor | PAGET et al. | |
| | Group Art Unit | | |
| | Examiner Name | | |

Attorney Docket Number ORT-1579

FEE CALCULATION

CLAIMS AS FILED

| (1) | (2) | (3) | (4) | (5) |
|---------------------------------|--------------|-----------------|------------|------------------------|
| FOR: | NUMBER FILED | NUMBER EXTRA | RATE | BASIC FEE \$ 740.00 |
| TOTAL CLAIMS | 27 - 20 = | 7 | x 18.00 | \$ 126.00 |
| INDEPENDENT CLAIMS | 1 - 3 = | 0 | x 84.00 | \$ 0.00 |
| MULTIPLE DEPENDENT CLAIMS | 3 | N/A | \$280.00 | 840.00 |
| | | TOTAL FEES | \$1,706.00 | |

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/ORT-1579/JSK in the amount of \$1,706.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/ORT-1579/JSK. Three copies of this sheet are enclosed.

| SUBMITTED E | Y: | | Complete (if applicable) |
|--------------------------|---------------------|----------------|--------------------------------|
| Typed or Printed Name | Joseph S. Kentoffio | | Reg. No. 33,189 |
| Signature | den D. Kentollin | Date: 02/06/02 | Deposit Account No. 10-0750 |

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Steven D. Paget, Michele A. Weidner-Wells and Harvey

M. Werblood

For : PYRIDOARYLPHENYL OXAZOLIDINONE ANTIBACTERIALS, AND

RELATED COMPOSITIONS AND METHODS

Express Mail Certificate

"Express Mail" mailing number: EF195554155US

Date of Deposit:

February 6, 2002

I hereby certify that this complete application, including specification pages, claims, abstract, and unexecuted Declaration and Power of Attorney, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

Karen Hall-Morgan (Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper of fee)